

DOH-PAS GROUP 43
Dental Crosswalk ICD to CDT

CDT Code	Prior Appr.	CDT Description
D0120	*	Periodic oral evaluation
D0140	*	Limited oral evaluation - problem focused
D0160	*	Detailed and extensive oral evaluation - problem focused
D0210	*	Intraoral; complete series (including bitewings)
D0220	*	Intraoral; periapical first film
D0230	*	Intraoral; periapical each additional film
D0240	*	Intraoral; occlusal film (ARCH)
D0250	*	Extraoral; first film
D0260	*	Extraoral; each additional film
D0270	*	Bitewing; single film
D0272	*	Bitewing; two films
D0274	*	Bitewing; four films
D0290	*	Posterior-anterior or lateral skull and facial bone survey film (3 films minimum)
D0310	*	Sialography
D0320	*	Temporomandibular joint arthrogram, including injection
D0321	*	Other temporomandibular joint films (per joint)
D0330	*	Panoramic film
D0340	*	Cephalometric film
D0350	*	Oral/facial images (includes intra and extraoral images)
D0470	*	Diagnostic casts (includes both arches when necessary)
D0999	*	Unspecified diagnostic procedure
D1110	*	Prophylaxis; adult (13 years of age and older)
D1120	*	Prophylaxis; child (under 13 years of age)
D1203	*	Topical application of fluoride (prophylaxis not included); child (under 21 years of age)
D1204	*	Topical application of fluoride (prophylaxis not included); adult (21 years of age and older)
D1351	*	Sealant - per tooth (TOOTH) (between 5 and 15 years of age)
D1510	*	Space maintainer - fixed; unilateral (QUAD)
D1515	*	Space maintainer - fixed; bilateral (ARCH)
D1550	*	Recementation of space maintainer
D2140	*	Amalgam Restoration-one surface primary or permanent
D2150	*	Amalgam Restoration-two surfaces primary or permanent
D2160	*	Amalgam Restoration-three surfaces primary or permanent
D2161	*	Amalgam Restoration-four or more surfaces primary or permanent
D2330	*	Resin-based Composite Restoration-one surface, anterior
D2331	*	Resin-based Composite Restoration-two surfaces, anterior
D2332	*	Resin-based Composite Restoration-three surfaces, anterior
D2335	*	Resin-based Composite Restoration-four or more surfaces or involving incisal angle, (anterior)
D2390	*	Resin-based Composite Restoration-crown, anterior
D2391	*	Resin-based Composite Restoration-one surface, posterior
D2392	*	Resin-based Composite Restoration-two surfaces, posterior
D2393	*	Resin-based Composite Restoration-three surfaces, posterior
D2394	*	Resin-based Composite Restoration-four or more surfaces, posterior
D2410	*	Gold foil- one surface
D2420	*	Gold foil- two surfaces
D2430	*	Gold foil- three surfaces
D2510	*	Inlay Restoration-metallic-one surface
D2520	*	Inlay Restoration-metallic-two surfaces
D2530	*	Inlay Restoration-metallic-three or more surfaces
D2542	*	Onlay- metallic-two surfaces
D2543	*	Onlay- metallic-three surfaces
D2544	*	Onlay- metallic-four or more surfaces
D2610	*	Inlay Restoration-porcelain/ceramic-one surface
D2620	*	Inlay Restoration-porcelain/ceramic-two surfaces
D2630	*	Inlay Restoration-porcelain/ceramic-three or more surfaces
D2642	*	Onlay-porcelain/ceramic- two surfaces

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D2643	*	Onlay-porcelain/ceramic- three surfaces
D2644	*	Onlay-porcelain/ceramic- four or more surfaces
D2650	*	Inlay Restoration; resin-based-one surface
D2651	*	Inlay Restoration; resin-based-two surfaces
D2652	*	Inlay Restoration; resin-based-three or more surfaces
D2662	*	Onlay-resin-based composite-two surfaces
D2663	*	Onlay-resin-based composite-three surfaces
D2664	*	Onlay-resin-based composite-four or more surfaces
D2710	*	Crown-resin (indirect)
D2720	*	Crown-resin with high noble metal
D2721	*	Crown-resin with predominantly base metal
D2722	*	Crown-resin with noble metal
D2740	*	Crown-porcelain/ceramic substrate
D2750	*	Crown-porcelain fused to high noble metal
D2751	*	Crown-porcelain fused to predominantly base metal
D2752	*	Crown-porcelain fused to noble metal
D2780	*	Crown-3/4 cast high noble metal
D2781	*	Crown-3/4 cast predominantly base metal
D2782	*	Crown-3/4 cast noble metal
D2783	*	Crown-3/4 porcelain/ceramic
D2790	*	Crown-full cast high noble metal
D2791	*	Crown- full cast predominantly base metal
D2792	*	Crown- full cast noble metal
D2799	*	Provisional crown
D2910	*	Other restorative services-recement inlay
D2920	*	Other restorative services-recement crown
D2930	*	Other restorative services-prefabricated stainless steel crown-primary tooth
D2931	*	Other restorative services-prefabricated stainless steel crown-permanent tooth
D2932	*	Other restorative services-prefabricated resin crown
D2933	*	Other restorative services-prefabricated stainless steel crown-with resin window
D2940	*	Other restorative services-sedative filling
D2950	*	Other restorative services-Core buildup, including any pins
D2951	*	Other restorative services-pin retention-per tooth, in addition to restoration
D2952	*	Other restorative services-cast post and core in addition to crown
D2953	*	Other restorative services-each additional cast post - same tooth
D2954	*	Other restorative services-prefabricated post and core in addition to crown
D2955	*	Other restorative services-post removal (not in conjunction with endodontic therapy)
D2957	*	Other restorative services-each additional prefabricated post-same tooth
D2960	*	Other restorative services-labial veneer (resin laminate)-chairside
D2961	*	Other restorative services-labial veneer (resin laminate)-laboratory
D2962	*	Other restorative services-labial veneer (porcelain laminate)-laboratory
D2970	*	Other restorative services-temporary crown (fractured tooth)
D2980	*	Other restorative services-crown repair by repair
D2999	*	Unspecified restorative procedure, by report
D3220	*	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament (TOOTH)
D3230	*	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration) (TOOTH)
D3240	*	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration) (TOOTH)
D3310	*	Endodontic Therapy-Anterior (excluding final restoration)
D3320	*	Endodontic Therapy-Bicuspid (excluding final restoration)
D3330	*	Endodontic Therapy-Molar (excluding final restoration)
D3331	*	Endodontic Therapy-Treatment of root canal obstruction; non-surgical access
D3332	*	Incomplete Endodontic Therapy; inoperable or fractured tooth
D3333	*	Internal Root Repair of perforation defects
D3346	*	Endodontic Retreatment-retreatment of previous root canal therapy-anterior
D3347	*	Endodontic Retreatment-retreatment of previous root canal therapy-bicuspid

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D3348	*	Endodontic Retreatment-retreatment of previous root canal therapy-molar
D3351	*	Apexification/Recalcification-initial visit (apical closure/calcific repair of perforations, root resorption, etc.)
D3352	*	Apexification/Recalcification-interim medication replacement (apical closure/calcific repair of perforations, root resorption, etc.)
D3353	*	Apexification/Recalcification-final visit (includes completed root canal therapy-apical closure/calcific repair of perforations, root resorption, etc.)
D3410	*	Apioectomy/periradicular surgery-anterior
D3421	*	Apioectomy/periradicular surgery-bicuspid (first root)
D3425	*	Apioectomy/periradicular surgery-molar (first root)
D3426	*	Apioectomy/periradicular surgery- (each additional root)
D3430	*	Retrograde filling - per root (TOOTH)
D3999	*	Unspecified endodontic procedure
D4210	*	Gingivectomy or Gingivoplasty-four or more contiguous teeth or bounded teeth spaces per quadrant
D4211	*	Gingivectomy or Gingivoplasty-one to three teeth, per quadrant
D4249	*	Clinical crown lengthening-hard tissue
D4341	*	Periodontal scaling and root planing - per quadrant (QUAD) (at least five teeth)
D4910	*	Periodontal maintenance (for patients who have previously been treated for periodontal disease)
D4999	*	Unspecified periodontal procedure
D5110	*	Complete denture - maxillary
D5120	*	Complete denture - mandibular
D5130	*	Immediate denture - maxillary
D5140	*	Immediate denture - mandibular
D5211	*	Maxillary Partial Denture-resin base (including any conventional clasps, rests and teeth)
D5212	*	Mandibular Partial Denture-resin base (including any conventional clasps, rests and teeth)
D5213	*	Maxillary Partial Denture-cast metal framework with resin denture bases (including any conventional clasps, rests, and teeth)
D5214	*	Mandibular Partial Denture-cast metal framework with resin denture bases (including any conventional clasps, rests, and teeth)
D5281	*	Removable Unilateral Partial Denture-one piece cast metal (including clasps and teeth)
D5510	*	Repair broken complete denture base (QUAD)
D5520	*	Replace missing or broken teeth - complete denture (each tooth) (TOOTH)
D5610	*	Repair resin denture base (QUAD)
D5620	*	Repair cast framework
D5640	*	Replace broken teeth - per tooth (TOOTH)
D5660	*	Add clasp to existing partial denture (TOOTH)
D5710	*	Rebase; complete maxillary denture
D5711	*	Rebase; complete mandibular denture
D5720	*	Rebase; maxillary partial denture
D5721	*	Rebase; mandibular partial denture
D5730	*	Reline; complete maxillary denture (chairside)
D5731	*	Reline; complete mandibular denture (chairside)
D5740	*	Reline; maxillary partial denture (chairside)
D5741	*	Reline; mandibular partial denture (chairside)
D5750	*	Reline; complete maxillary denture (laboratory)
D5751	*	Reline; complete mandibular denture (laboratory)
D5760	*	Reline; maxillary partial denture (laboratory)
D5761	*	Reline; mandibular partial denture (laboratory)
D5820	*	Interim partial denture (maxillary)
D5821	*	Interim partial denture (mandibular)
D5850	*	Tissue conditioning, maxillary
D5851	*	Tissue conditioning, mandibular
D5899	*	Unspecified removable prosthodontic procedure
D5911	*	Facial moulage (sectional)
D5912	*	Facial moulage (complete)
D5913	*	Nasal prosthesis
D5914	*	Auricular prosthesis

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D5915	*	Orbital prosthesis
D5916	*	Ocular prosthesis
D5919	*	Facial prosthesis
D5922	*	Nasal septal prosthesis
D5923	*	Ocular prosthesis, interim
D5924	*	Cranial prosthesis
D5925	*	Facial augmentation implant prosthesis
D5926	*	Nasal prosthesis, replacement
D5927	*	Auricular prosthesis, replacement
D5928	*	Orbital prosthesis, replacement
D5929	*	Facial prosthesis, replacement
D5931	*	Obturator prosthesis, surgical
D5932	*	Obturator prosthesis, definitive
D5933	*	Obturator prosthesis, modification
D5934	*	Mandibular resection prosthesis with guide flange
D5935	*	Mandibular resection prosthesis without guide flange
D5936	*	Obturator prosthesis, interim
D5937	*	Trismus appliance (not for TMD treatment)
D5951	*	Feeding aid
D5952	*	Speech aid prosthesis, pediatric
D5953	*	Speech aid prosthesis, adult
D5954	*	Palatal augmentation prosthesis
D5955	*	Palatal lift prosthesis, definitive
D5958	*	Palatal lift prosthesis, interim
D5959	*	Palatal lift prosthesis, modification
D5960	*	Speech aid prosthesis, modification
D5982	*	Surgical stent
D5983	*	Radiation carrier
D5984	*	Radiation shield
D5985	*	Radiation cone locator
D5986	*	Fluoride gel carrier (per arch) (ARCH)
D5987	*	Commissure splint
D5988	*	Surgical splint
D5999	*	Unspecified maxillofacial prosthesis
D6010	*	Surgical placement of implant body: endosteal implant
D6020	*	Abutment placement or substitution: endosteal implant
D6040	*	Surgical placement: eposteal implant
D6050	*	Surgical placement: transosteal implant
D6053	*	Implant/abutment supported removable denture for completely edentulous arch
D6054	*	Implant/abutment supported removable denture for partially edentulous arch
D6055	*	Dental implant supported connecting bar
D6056	*	Prefabricated abutment
D6057	*	Custom Abutment
D6058	*	Abutment supported porcelain/ceramic crown
D6059	*	Abutment supported porcelain fused to metal crown (high noble metal)
D6060	*	Abutment supported porcelain porcelain fused to metal crown (predominantly base metal)
D6061	*	Abutment supported porcelain fused to metal crown (noble metal)
D6062	*	Abutment supported cast metal crown (high noble metal)
D6063	*	Abutment supported cast metal crown (predominantly base metal)
D6064	*	Abutment supported cast metal crown (noble metal)
D6065	*	Implant supported porcelain/ceramic crown
D6066	*	Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)
D6067	*	Implant supported metal crown (titanium, titanium alloy, high noble metal)
D6068	*	Abutment supported retainer for porcelain/ceramic FPD
D6069	*	Abutment supported retainer for porcelain fused to metal FPD (high noble metal)

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CDT Code	Prior Appr.	CDT Description
D6070	*	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)
D6071	*	Abutment supported retainer for porcelain fused to metal FPD (noble metal)
D6072	*	Abutment supported retainer for cast metal FPD (high noble metal)
D6073	*	Abutment supported retainer for cast metal FPD (predominantly base metal)
D6074	*	Abutment supported retainer for cast metal FPD (noble metal)
D6075	*	Implant supported retainer for ceramic FPD
D6076	*	Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal)
D6077	*	Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal)
D6078	*	Implant/abutment supported fixed denture for completely edentulous arch
D6079	*	Implant/abutment supported fixed denture for partially edentulous arch
D6210	*	Pontic-cast high noble metal
D6211	*	Pontic-cast predominantly base metal
D6212	*	Pontic-cast noble metal
D6240	*	Pontic-porcelain fused to high noble metal
D6241	*	Pontic-porcelain fused to predominantly base metal
D6242	*	Pontic-porcelain fused to noble metal
D6245	*	Pontic-porcelain/ceramic
D6250	*	Pontic-resin with high noble metal
D6251	*	Pontic-resin with predominantly base metal
D6252	*	Pontic-resin with noble metal
D6253	*	Provisional pontic
D6545	*	Retainer-cast metal for resin bonded fixed prothesis
D6548	*	Retainer-porcelain/ceramic for resin bonded fixed prothesis
D6600	*	FPD Inlay-porcelain/ceramic, two surfaces
D6601	*	FPD Inlay-porcelain/ceramic, three or more surfaces
D6602	*	FPD; Inlay-cast high noble metal, two surfaces
D6603	*	FPD; Inlay-cast high noble metal, three or more surfaces
D6604	*	FPD; Inlay-cast predominantly base metal, two surfaces
D6605	*	FPD; Inlay-cast predominantly base metal, three or more surfaces
D6606	*	FPD; Inlay-cast noble metal, two surfaces
D6607	*	FPD; Inlay-cast noble metal, three or more surfaces
D6608	*	FPD; Onlay-porcelain/ceramic, two surfaces
D6609	*	FPD; Onlay-porcelain/ceramic, three or more surfaces
D6610	*	FPD; Onlay-cast high noble metal, two surfaces
D6611	*	FPD; Onlay-cast high noble metal, three or more surfaces
D6612	*	FPD; Onlay-cast predominantly base metal, two surfaces
D6613	*	FPD; Onlay-cast predominantly base metal, three or more surfaces
D6614	*	FPD; Onlay-cast noble metal, two surfaces
D6615	*	FPD; Onlay-cast noble metal, three or more surfaces
D6720	*	FPD; Crown-resin with high noble metal
D6721	*	FPD; Crown-resin with predominantly base metal
D6722	*	FPD; Crown-resin with noble metal
D6740	*	FPD; Crown-porcelain/ceramic
D6750	*	FPD; Crown-porcelain fused to high noble metal
D6751	*	FPD; Crown-porcelain fused to predominantly base metal
D6752	*	FPD; Crown-porcelain fused to noble metal
D6780	*	FPD; Crown-3/4 cast high noble metal
D6781	*	FPD; Crown-3/4 cast predominantly base metal
D6782	*	FPD; Crown-3/4 cast noble metal
D6783	*	FPD; Crown-3/4 porcelain/ceramic
D6790	*	FPD; Crown-full cast high noble metal
D6791	*	FPD; Crown-full cast predominantly base metal
D6792	*	FPD; Crown-full cast noble metal
D6793	*	Provisional retainer crown
D6930	*	Recement fixed partial denture (QUAD)

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CDT Code	Prior Appr.	CDT Description
D6970	*	Cast post and core in addition to fixed partial denture retainer (TOOTH)
D6972	*	Prefabricated post and core in addition to fixed partial denture retainer (TOOTH)
D6980	*	Fixed partial denture repair (QUAD) (use for bridge repair and severing, per unit, per quadrant)
D6999	*	Unspecified, fixed prosthodontic procedure
D7111	*	Extractions-Coronal remnants-deciduous tooth
D7140	*	Extractions-Extraction, erupted tooth or exposed root (elevation and/or forceps removal)
D7210	*	Surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of tooth
D7220	*	Removal of impacted tooth-soft tissue
D7230	*	Removal of impacted tooth-partially bony
D7240	*	Removal of impacted tooth-completely bony
D7241	*	Removal of impacted tooth-completely bony, with unusual surgical complications
D7250	*	Surgical removal of residual tooth roots (cutting procedure)
D7260	*	Oroantral fistula closure
D7261	*	Primary closure of a sinus perforation
D7270	*	Tooth reimplantation and/or stabilization of accidentally avulsed or displaced tooth
D7272	*	Tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)
D7280	*	Surgical access of an unerupted tooth
D7281	*	Surgical exposure of impacted unerupted tooth to aid in eruption
D7282	*	Mobilization of erupted or malpositioned tooth to aid eruption
D7285	*	Biopsy of oral tissue-hard (bone, tooth)
D7286	*	Biopsy of oral tissue-soft (all others)
D7290	*	Surgical repositioning of teeth
D7291	*	Transseptal fiberotomy/supra crestal fiberotomy, by report
D7310	*	Alveoplasty in conjunction with extractions-per quadrant
D7320	*	Alveoplasty not in conjunction with extractions-per quadrant
D7340	*	Vestibuloplasty - ridge extension (secondary epithelialization)
D7350	*	Vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied and hyperplastic tissue)
D7410	*	Surgical excision of benign lesion up to 1.25 cm
D7411	*	Surgical excision of benign lesion greater than 1.25 cm
D7412	*	Surgical excision of benign lesion, complicated
D7413	*	Surgical excision of malignant lesion up to 1.25 cm
D7414	*	Surgical excision of malignant lesion greater than 1.25 cm
D7415	*	Surgical excision of malignant lesion, complicated
D7440	*	Surgical excision of malignant tumor-lesion diameter up to 1.25 cm
D7441	*	Surgical excision of malignant tumor-lesion greater than 1.25 cm
D7450	*	Removal of benign odontogenic cyst or tumor lesion up to 1.25 cm
D7451	*	Removal of benign odontogenic cyst or tumor lesion greater than 1.25 cm
D7460	*	Removal of benign nonodontogenic cyst or tumor lesion up to 1.25 cm
D7461	*	Removal of benign nonodontogenic cyst or tumor lesion greater than 1.25 cm
D7465	*	Destruction of lesion by physical or chemical method, by report
D7471	*	Excision of bone tissue; removal of lateral exostosis (maxilla or mandible)
D7472	*	Excision of bone tissue; removal of torus palatinus
D7473	*	Excision of bone tissue; removal of torus mandibularis
D7485	*	Excision of bone tissue; surgical reduction of osseous tuberosity
D7490	*	Excision of bone tissue; radical resection of mandible with bone graft
D7510	*	Incision and drainage of abscess-intraoral soft tissue
D7520	*	Incision and drainage of abscess-extraoral soft tissue
D7530	*	Removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue
D7540	*	Removal of reaction producing foreign bodies, musculoskeletal system
D7550	*	Partial osteotomy/sequestrectomy for removal of non-vital bone
D7560	*	Maxillary sinusotomy for removal of tooth fragment or foreign body
D7610	*	Treatment of Fractures (simple) Maxilla- Open reduction (teeth immobilized, if present)
D7620	*	Treatment of Fractures (simple) Maxilla- Closed reduction (teeth immobilized, if present)
D7630	*	Treatment of Fractures (simple) Mandible- Open reduction (teeth immobilized, if present)

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D7640	*	Treatment of Fractures (simple) Mandible- Closed reduction (teeth immobilized, if present)
D7650	*	Treatment of Fractures (simple) Malar and/or zygomatic arch - open reduction
D7660	*	Treatment of Fractures (simple) Malar and/or zygomatic arch - closed reduction
D7670	*	Treatment of Fractures (simple) Alveolus - closed reduction, may include stabilization of teeth
D7671	*	Treatment of Fractures (simple) Alveolus - open reduction, may include stabilization of teeth
D7680	*	Treatment of Fractures (simple) Facial bones - complicated reduction with fixation and multiple surgical approaches
D7710	*	Treatment of Fractures (compound) Maxilla - Open reduction
D7720	*	Treatment of Fractures (compound) Maxilla - Closed reduction
D7730	*	Treatment of Fractures (compound) Mandible - Open reduction
D7740	*	Treatment of Fractures (compound) Mandible - Closed reduction
D7750	*	Treatment of Fractures (compound) Malar and/or zygomatic arch - open reduction
D7760	*	Treatment of Fractures (compound) Malar and/or zygomatic arch - closed reduction
D7770	*	Treatment of Fractures (compound) Alveolus - open reduction stabilization of teeth
D7771	*	Treatment of Fractures (compound) Alveolus - closed reduction stabilization of teeth
D7780	*	Treatment of Fractures (compound) Facial bones - complicated reduction with fixation and multiple surgical approaches
D7810	*	Open reduction of dislocation
D7820	*	Closed reduction of dislocation
D7830	*	Manipulation under anesthesia
D7840	*	Condylectomy
D7850	*	Surgical discectomy, with/without implant
D7852	*	Disc repair
D7854	*	Synovectomy
D7856	*	Myotomy
D7858	*	Joint reconstruction
D7860	*	Arthrotomy
D7865	*	Arthroplasty
D7870	*	Arthrocentesis
D7871	*	Non-arthroscopic lysis and lavage
D7872	*	Arthroscopy - diagnosis, with or without biopsy
D7873	*	Arthroscopy - surgical: lavage and lysis of adhesions
D7874	*	Arthroscopy - surgical: disc repositioning and stabilization
D7875	*	Arthroscopy - surgical: synovectomy
D7876	*	Arthroscopy - surgical: discectomy
D7877	*	Arthroscopy - surgical: debridement
D7880	*	Occlusal orthotic device, by report
D7899	*	Unspecified TMD therapy, by report
D7910	*	Suture of recent small wounds up to 5 cm
D7911	*	Complicated suture- up to 5 cm
D7912	*	Complicated suture- greater than 5 cm
D7920	*	Skin graft (identify defect covered, location and type of graft)
D7940	*	Osteoplasty - for orthognathic deformities
D7941	*	Osteotomy - mandibular rami
D7943	*	Osteotomy - mandibular rami with bone graft; includes obtaining the graft
D7944	*	Osteotomy - segmented or subapical - per sextant or quadrant
D7945	*	Osteotomy - body of mandible
D7946	*	LeFort I (maxilla - total)
D7947	*	LeFort I (maxilla - segmented)
D7948	*	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft
D7949	*	LeFort II or LeFort III - with bone graft
D7950	*	Osseous, osteoperiosteal, or cartilage graft of the mandible or facial bones - autogenous or nonautogenous, by report
D7955	*	Repair of maxillofacial soft and hard tissue defect
D7960	*	Frenulectomy (frenectomy or frenotomy) - separate procedure
D7970	*	Excision of hyperplastic tissue - per arch (ARCH)

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D7971	*	Excision of pericoronal gingiva (TOOTH)
D7972	*	Surgical reduction of fibrous tuberosity
D7980	*	Sialolithotomy
D7982	*	Sialodochoplasty
D7983	*	Closure of salivary fistula
D7990	*	Emergency tracheotomy
D7991	*	Coronoidectomy
D7997	*	Appliance removal (not by dentist who placed appliance), includes removal of archbar
D7999	*	Unspecified oral surgical procedure
D9110	*	Palliative (emergency) treatment of dental pain - minor procedure (documentation required)
D9220	*	General anesthesia - first 30 minutes
D9221	*	General anesthesia - each additional 15 minutes
D9241	*	Intravenous sedation/analgesia - first 30 minutes (parenteral sedation)
D9242	*	Intravenous sedation/analgesia - each additional 15 minutes (parenteral sedation)
D9310	*	Consultation (diagnostic service provided by dentist or physician other than practitioner providing treatment)
D9410	*	House/extended care facility call
D9420	*	Hospital call
D9430	*	Office visit for observation (during regularly scheduled hours) - no other services performed
D9440	*	Office visit - after regularly scheduled hours
D9610	*	Therapeutic drug injection
D9920	*	Behavior management (OMRDD client identification form required)
D9940	*	Occlusal guard
D8210	*	Removable appliance therapy
D8220	*	Fixed appliance therapy
D8999	*	Unspecified orthodontic procedure, by report